



**Oil And/Or Gas Company Registration**  
Office of State Tax Commissioner  
SFN 29403

**Company Information**

Company Name			FEIN	Fax Number
Street or Other Mailing Address			Business Contact Name and Telephone Number ( )	
City	State	Zip Code	E-mail Address	
Technical Contact Name and Telephone Number ( )			Technical Contact E-mail Address	

1. Registration Purpose: ☐ New Business ☐ Change in Ownership  
☐ Change of Name ☐ Change of Federal ID

2. If change in Name or Federal ID:

Previous Name: \_\_\_\_\_

Previous Federal ID: \_\_\_\_\_

3. Oil and/or Gas Activity: ☐ Producer ☐ Purchaser ☐ Both

4. Beginning date of operations or effective date of change: \_\_\_\_\_

**Sign  
Here** 

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone Number

Please return this form to: Oil & Gas Tax Section, North Dakota Office of State Tax Commissioner,  
600 E. Boulevard Ave., Dept. 127, Bismarck, ND 58505-0599.

If you have any questions, please call (701)328-3657.